

IND-EXPO CERTIFICATION LIMITED
 INTEGRATED MANAGEMENT SYSTEMS CERTIFICATION LIMITED
 APPLICATION REVIEW CHECK LIST

1. Name & address of applicant Halchem Lanka Private Limited,
73/15A, Temple Road, off Kirulapone Avenue, Colombo 05.
2. Types of products manufactured/services offered: fire Engineering,
under water Sport Equipment, Environmental science.
3. Management system certification applied for: ISO 9001: 2015

PLEASE TICK "X" THE APPROPRIATE CAGE.

- | | Yes | No | yes | No |
|--|-------------------------------------|-------------------------------------|-------------------------------------|---|
| 4. Is it a new application? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 5. Has the organization given the contact details? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6. Has the organization identified the applicable legal requirements? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 7. Is it a multisite organization? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> N/A |
| 8. If so, are the site locations given? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> N/A |
| 9. Is the product range of the site for each site given? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> N/A |
| 10. Do the product range of the sites differ from the main site? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> N/A |
| 11. Are the departments /sections/processes listed? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 12. Has the scope been defined? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 13. Does the organization outsource any process related to the management to be certified? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 14. Are there competent auditors available for the specified scope? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
- 14.1 what is the complexity of the category (Low, medium, high, limited or special)
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14.2 List of auditor/ audit team as per the required team competency

(ISO 17021-3 for EMS, ISO 17021-10 for OHSAS)

Mr. Isuru Ilangakoon.

Ms. Mibiri fernando.

Mr. D.N.S. Kurupemullige

Mr. Aruna Amaradasa

Document No.: QP-03-CHK-01

Issue No.: 05

Issue Date: 2015-12-31

Rev No: 03

Rev Date: 2020-06-01

Reviewed and approved by: Director

Issued by: Management Representative

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15. Are the services of a technical expert needed?

yes

NO

15.1 List of technical experts

16. Are there technical experts available for the defined scope?

17. Has the organization obtained the services of a Consultant?

18. Has the CB determined the audit time

19. Is the information provided by the applicant sufficient for conducting The audit?

Recommendation of Reviewing officer:

Recommended

P. S. S. S.

Signature of Reviewing Officer

2019/10/15
Date

Approval from certification Manager

Signature

Date

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